

SAN FRANCISCO OFFICE
180 Howard Street
San Francisco, CA 94105-1639
415.538.2351
www.calbar.ca.gov

The State Bar of California Application for Employment

LOS ANGELES OFFICE
845 S. Figueroa Street
Los Angeles, CA 90017-2515
213.765.1100
www.calbar.ca.gov

Date:

Position:

Office:

1. PERSONAL INFORMATION

| | | | | | |
|--|--------|------------|---|--------|----------|
| Last Name | | First Name | | Middle | |
| Address where you can be reached (You must list street address. P.O. Box is not acceptable.) | | | | | |
| Street Address | | Apt | City | State | Zip Code |
| Home # | Work # | Cell # | E-mail | | |
| To complete our records, indicate all other names you have used while working or attending schools: | | | | | |
| Do you have relatives or persons you know who are employed or previously employed by the State Bar? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate names, relationships and in which offices: | | | | | |
| Have you previously been employed by the State Bar? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously worked as a temporary laborer or contractor at the State Bar? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you previously been interviewed OR applied for employment with the State Bar? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, indicate dates, positions and outcome(s): | | | | | |
| Are you able to perform the essential functions of the position for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain: | | | | | |
| Do you have the legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Have you ever taken the California Bar Examination? <input type="checkbox"/> Yes <input type="checkbox"/> No Also do you have any intent to do so? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Have you ever been fired, terminated, or had an employment contract terminated from any position for disciplinary or performance issues? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain on another page | | | State Bar employees are subject to criminal record clearance. Conviction of a felony may prevent employment. ____ initial | | |
| How did you come to know about this position? | | | | | |

2. JOB-RELATED INFORMATION

| | | |
|---|-------------------------------------|-------------------------------------|
| Salary Expectations: | Date you can start employment here: | List languages you are fluent with: |
| List technical knowledge, computer applications or pc skills you possess: | | |
| List any other skills, abilities, knowledge, or achievements you acquired related to this position: | | |
| List membership in professional organizations or associations, honors, licenses and publications you consider significant, date of admission to the State Bar of California (if applicable), and any other skills or information which may be important in considering your qualifications: | | |
| California Bar admission date: | | Bar Number: |

3. ACCREDIT EDUCATION

Note: Applicants may be required to provide proof of diploma, degree, transcripts, license, certifications, and registrations.

High School Graduate or GED? ☐ Yes ☐ No If yes, name and location of high school or GED Institute: _____

| NAME & ADDRESS | Dates Attended Begin - End | | Major/Minor | Degrees, Diploma, License or Certificate Received | Date Graduated |
|--|-------------------------------|--|-------------|---|----------------|
| University or Colleges | | | | | |
| Law or Professional Academic School(s) | | | | | |
| Other Accredited Study | | | | | |

How many years of post-secondary education have you completed?

| 4. EMPLOYMENT HISTORY (THIS SECTION MUST BE COMPLETED) | | | |
|---|------------------|--------------------------------------|--------------------|
| List all employment for the past 10 years, or since leaving school, starting with your most recent position. Include job-related volunteer experience. All time should be accounted for. If you were unemployed for any period, state the nature of your activities during that time. | | | |
| | RESPONSIBILITIES | SUPERVISOR'S NAME AND CONTACT NUMBER | REASON FOR LEAVING |
| Current Employer | | | |
| Address | | | |
| City, State, Zip | | | |
| Ending monthly salary | | | |
| Dates employed (from/to) | | | |
| May we contact current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Position: Provide details on any supervisory role; include dates and context: | | | |
| Past employer name | | | |
| Address | | | |
| City, State, Zip | | | |
| Ending monthly salary | | | |
| Dates employed | | | |
| Position: Provide details on any supervisory role; include dates and context: | | | |
| Past employer name | | | |
| Address | | | |
| City, State, Zip | | | |
| Ending monthly salary | | | |
| Dates employed (from/to) | | | |
| Position: Provide details on any supervisory role; include dates and context: | | | |
| Past employer name | | | |
| Address | | | |
| City, State, Zip | | | |
| Ending monthly salary | | | |
| Dates employed (from/to) | | | |
| Position: Provide details on any supervisory role; include dates and context: | | | |

For additional work history attach another sheet.

| 5. Provide three (3) Direct Report References. REFERENCES WHO SUPERVISED YOUR WORK | | |
|--|-------|--|
| Name of reference | Phone | Title of reference and employer's name |
| Name of reference | Phone | Title of reference and employer's name |
| Name of reference | Phone | Title of reference and employer's name |

All job offers are contingent upon results of a background clearance from the California Department of Justice.

I declare each of the answers given to the questions on this application to be complete and true to the best of my knowledge. I understand that any false, incomplete or incorrect statement may be cause for disqualification from the hiring process or dismissal. I authorize the investigation of all statements given in this application, including contacting former employers, educational institutions and professional references.

APPLICANT'S SIGNATURE

DATE